

1	-White, Non Hispanic		
2	-Black, Non Hispanic		
3	-Asian, Pacific Isl.	14. Net Family Assets (NOTE: If Line 14 does not exceed \$5,000, enter zero on Line 15.)	\$ <input type="text"/>
4	-American Indian Alaskan Native	15. Imputed Income from Assets (Bank Passbook Savings Rate (* ) x Line 14.)	\$ <input type="text"/>
5	-Hispanic	16. Income from Assets	\$ <input type="text"/>

<p>17. Income</p> <p>a. Wages, Salaries, etc. <span style="float: right;">\$ <input style="width: 150px; height: 25px;" type="text"/></span></p> <p>b. Soc. Sec., Pensions, etc. <span style="float: right;">\$ <input style="width: 150px; height: 25px;" type="text"/></span></p> <p>c. Assistance <span style="float: right;">\$ <input style="width: 150px; height: 25px;" type="text"/></span></p> <p>d. Income Contributed by Assets <span style="float: right;">\$ <input style="width: 150px; height: 25px;" type="text"/></span>  <i>(Greater of Line 15 or Line 16)</i></p> <p>e. Other <span style="float: right;">\$ <input style="width: 150px; height: 25px;" type="text"/></span></p> <p>f. Annual Income <span style="float: right;">\$ <input style="width: 150px; height: 40px;" type="text"/></span></p>	<p>18. Adjustments to Income</p> <p>a. \$480 x total of Line 11 <span style="float: right;">\$ <input style="width: 150px; height: 25px;" type="text"/></span></p> <p>b. \$400 if elderly status <span style="float: right;">\$ <input style="width: 150px; height: 25px;" type="text"/></span></p> <p>c. Medical exceeding 3% of Line 17.f. <span style="float: right;">\$ <input style="width: 150px; height: 25px;" type="text"/></span>  <i>(if elderly, handicapped or disabled)</i></p> <p>d. Child Care <span style="float: right;">\$ <input style="width: 150px; height: 25px;" type="text"/></span></p> <p>e. Total Adjustments <span style="float: right;">\$ <input style="width: 150px; height: 40px;" type="text"/></span></p> <p>19. Adjusted Annual Income <span style="float: right;">\$ <input style="width: 150px; height: 40px;" type="text"/></span>  <i>(Line 17.f. minus Line 18.e.)</i></p>
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20. Number of Household Members	<input type="text"/>	22. Date of Initial Project Entry	<input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
21. Current Eligibility Income Level (Enter Code)	<input type="text"/>	23. Eligibility Income Level at Initial Project Entry (Enter Code)	<input type="text"/>

I certify that the information in PARTS 11 through IV is true and correct to the best of my knowledge and belief. Inquiries may be made to verify this information.

According to the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0575-0033. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

**PART VII-PRELIMINARY CALCULATIONS**

24. Adjusted Monthly Income (Line 19 / 12)	a. \$		x .30	= b. \$	
25. Monthly Income (Line 17.f. / 12)	a. \$		x .10	= b. \$	
26. Designated Monthly Welfare Shelter Payment				\$	
27. Highest of Line 24.b., Line 25.b., or Line 26.					
28. Gross Basic Rent					
a. Basic Rent	\$				
b. Utility Allowance	\$				
c. (Line 28. a. + Line 28. b.)	\$				
29. Gross Note Rate Rent					
a. Note Rate Rent	\$				
b. Utility Allowance	\$				
c. (Line 29.a. + Line 29.b.)	\$				

**PART VIII-DETERMINING GROSS TENANT CONTRIBUTION (GTC)**

Decision: (check one)

☐ A. If tenant receives rental assistance (RA) enter Line 27 on Line 30 below. If Line 27 exceeds Line 28.c., go to Decision B since this Tenant will not receive RA.

☐ B. If tenant does not receive RA and this project receives Plan 11 Interest Credit, enter the greater of Line 27 or Line 28.c. (but not to exceed Line 29.c.) on Line 30 below.

☐ C. If tenant does not receive RA and this project is a Plan 1, Full Profit or Labor Housing project complete Lines C.1. thru C.3. and enter Line C.3. on Line 30.

C.1. Enter Line 29.c.	\$	
C.2. Add Plan I Surcharge (if any)	\$	
C.3. Total (enter on Line 30)	\$	

**PART IX-DETERMINING NET TENANT CONTRIBUTION (NTC)**

30. GTC (From PART VIII)	\$	
31. Utility Allowance (Line 28.b. or Line 29.b.)	\$	
32. Final NTC (Line 30 minus Line 30)	\$	

(Amount Tenant pays Borrower for rent. If Line 32 is negative, Borrower pays the difference to Tenant for utilities.)

**PART X-CERTIFICATION BY BORROWER**

I certify that the information on this form has been verified as required by federal law and the tenant household	Project Name (optional):
<input type="checkbox"/> is eligible to live in the unit, or <input type="checkbox"/> has been granted ineligible occupancy by RHS.	

a. Date Signed	b. Signature of Borrower or Borrower's Representative
<div style="border: 1px solid black; padding: 2px;">M M D D Y Y</div>	

**PART XI-RHS CERTIFICATION**

Based on information provided by the Borrower, the calculations for this form are correct.

a. Date	b. Signature of RHS Representative
<div style="border: 1px solid black; padding: 2px;">M M D D Y Y</div>	